

Entered – 2-19-01- sb
CL – 01L0126 ALEXIS HOLMES

01- R-0399

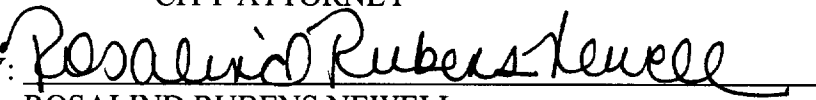
CLAIM OF: **ENTERPRISE RENT-A-CAR**
3109 Maple Drive
Suite 325
Atlanta, Georgia 30305

For damages alleged to have been sustained as a result of vehicle accident on November 12, 2000 at 865 Martin Luther King, Jr. Drive.

BY PUBLIC SAFETY AND
LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **ENTERPRISE RENT-A-CAR** the sum of **\$1,009.16** in full settlement and satisfaction of all claims, past, present and future, of every kind and character **for damages alleged to have been sustained as a result of vehicle accident on November 12, 2000 at 865 Martin Luther King, Jr. Drive** as is more particularly set forth in the within claim; said sum taken from and charged to account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD
CITY ATTORNEY

BY: 
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0126

Date: 2/26/01

Claimant /Victim ENTERPRISE RENT-A-CAR

BY: (Atty) _____

Address: 3109 Maple Drive, Suite 325 Atlanta, Georgia 30305

Subrogation: _____ Claim for Property damage \$ 1,009.16 Bodily Injury \$ _____

Date of Notice: 2/2/01 Method: Written, proper X Improper _____

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 11/12/00 Place: 865 Martin Luther King, Jr. Drive

Department Public Works Division: Solid Waste and Transportation

Employee involved Stanley Bryant Disciplinary Action: Oral Admonishment

NATURE OF CLAIM: The claimant sustained damage to its vehicle when the driver of a City vehicle backed into the claimant's parked vehicle.

INVESTIGATION:

Statements: City employee _____ Claimant X Other _____ Written X Oral _____

Pictures _____ Diagrams X Reports: Police X Dept Report X Other _____

Traffic citations issued: City Driver _____ Claimant Driver _____

Citation disposition: City Driver _____ Claimant Driver _____

BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial _____

Improper Notice _____ More than Six Months _____ Other _____ Damages reasonable X

City not involved _____ Offer rejected _____ Compromise settlement _____

Repair/replacement by Ins. Co. _____ Repair/replacement by City Forces _____

Claimant Negligent _____ City Negligent X Joint _____ Claim Abandoned _____

Respectfully submitted,


INVESTIGATOR - ALEXIS HOLMES

RECOMMENDATION:

Pay \$ 1,009.16 Adverse _____ Account charged: 1A01 X 2J01 _____ 2H01 _____

Claims Manager:  Concur/date 02-27-01

Committee Action: _____ Council Action _____



3109 Maple Dr., Suite 325
Atlanta, GA 30305
404-364-5210
Stanley Bryant
1328 Park Ave Apt D
Atlanta, GA 30315

Holmes
02/15/01
DR

February 02, 2001

ENTERED - 2-19-01 - SB
01L0126 - ALEXIS HOLMES

E: Our Claim Number: DX0302W46
Date of Loss: ~~12/08/2000~~ 11/12/00
Total Amount Owed: \$1,009.16

Dear Mr. Bryant:

This letter concerns an automobile accident report that indicates you were involved in an accident with our vehicle. Our investigation reveals that you are legally liable for the damages to our car.

If you are insured, please forward this letter and the enclosed documents to your insurance company immediately. If you are not insured, please send us a check or money order with our claim number on it within fifteen (15) days of the date of this letter.

Please be advised that your failure to answer this letter within thirty (30) days after receipt of same, indicating that you dispute the validity of the debt, any portion of the debt, or the facts stated in this letter, will constitute a presumption that you admit and adopt the propriety of the contents of this letter in accordance with Georgia law.

If you have any questions, please advise.

Thank you.

Sincerely,

Shannetta L. Reid
Senior Loss Control Administrator
404/364-5210 ext.185

cc: file

01-R-0399